

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

**SUBMIT IN TRIPLICATE**

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Sonat Exploration

3. Address and Telephone No.

110 W. Louisiana, Suite 500, Midland, Texas 79701

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

660 FNL and 1980 FWL, Section 15, T-24-S, R-31-E

5. Lease Designation and Serial No.

NM 56741

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Lotos A Federal #1

9. API Well No.

30 015 26174

10. Field and Pool, or Exploratory Area

S. Sand Dune Lower Penn

11. County or Parish, State

Eddy County, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other change of operator  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Change of Operator from:  
Bettis, Boyle & Stovall  
P.O. Box 1240  
Graham, Texas 76046

To:  
Sonat Exploration  
110 W. Louisiana, Suite 500  
Midland, Texas 79701

Effective date: 12-15-94

DEC 28 '94

O. C. D.  
ARTESIA, OFFICE

14. I hereby certify that the foregoing is true and correct

Signed

Title

Attorney-in-fact

Date

12-15-94

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any